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Date: May 5, 2005

To: Examiner Habte Mered
Group Art Unit: 2662

Fax No.: (703) 872-9306

Re: U.S. Patent Application No. 09/533,421
Filed: March 22, 2000
Applicants: Charles S. Roberson
Docket No: CISC794
Attorney: Peggy A. Su

Attached:

- 1) Transmittal Form (1 pg);
- 2) Amendment D (18 pgs).

Total Pages (including cover sheet) 20

CERTIFICATE OF FACSIMILE

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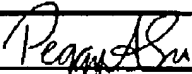
Diane Elzingre
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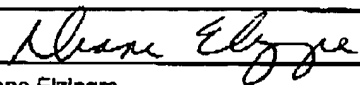
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PTO/SO/21 (09-04)

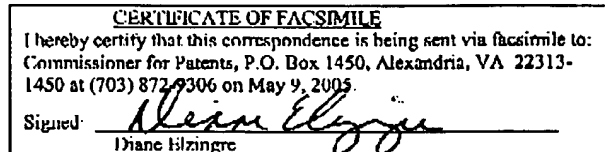
TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/533,421
	Filing Date	March 22, 2000
	First Named Inventor	Charles S. Roberson
	Art Unit	2662
	Examiner Name	Habte Mered
	Attorney Docket Number	CISCP794
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652. In response to the Office Action mailed February 25, 2005, please make the enclosed of record.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Ritter, Lang & Kaplan LLP		
Signature			
Printed name	Peggy A. Su		
Date	May 5, 2005	Reg. No.	41,336

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Diane Elzingre	Date	May 5, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	09/533,421	Confirmation No.:	8630
Applicant	:	Charles S. Roberson		
Filed	:	March 22, 2000		
TC/A 11	:	7662		
Examiner	:	FRANCIS M. M. M.		
Docket No.	:	CISCP794		
Customer No.	:	26541		
Title	:	METHOD AND APPARATUS FOR CONTROLLING THE OPERATION OF A FLEXIBLE CROSS-CONNECT SYSTEM		

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT D

Sir:

In response to the Office Action of February 25, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.